

M. GALE LEMMON #4363
Assistant Attorney General
MARK L. SHURTLEFF #4666
Attorney General
Attorneys for Utah Insurance Department
State Office Building, Room 3110
Salt Lake City, UT 84114
Telephone (801) 538-3872

BEFORE THE INSURANCE COMMISSIONER OF THE STATE OF UTAH

COMPLAINANT:

UTAH STATE INSURANCE DEPARTMENT

RESPONDENT:

JASON LEE JONES
2019 N. Gateway Blvd.
Fresno, CA 93727
License No. 139376 (Lapsed)

**DEFAULT AND
DEFAULT ORDER**

Docket No. 2006-005-LF

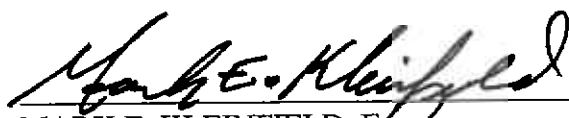
Enf. Case No. 1727

DEFAULT

Please take notice that, pursuant to Utah Code Annotated Section 63-46b-11, and more than 30 days having elapsed since the mailing of the Complaint and Notice of Formal Adjudicative Proceeding in this matter, and no response having been received, and the day and time having arrived for the Pre-hearing set in this matter, and the Complainant appearing by and through its counsel, M. Gale Lemmon, Assistant Attorney General, and the Respondent having failed to appear, either in person or by representation, the Default of the Respondent is hereby entered.

DATED this 27th day of February, 2006.

D. KENT MICHIE
INSURANCE COMMISSIONER


MARK E. KLEINFELD, Esq.
Presiding Officer
Utah Department of Insurance

DEFAULT ORDER

The Default of the Respondent having previously been entered, the presiding officer hereby adopts the allegations in the Complaint as his Findings of Fact and Conclusions of Law, and enters the following Order:

IT IS HEREBY ORDERED:

1. The insurance license of the Respondent, Jason Lee Jones, is hereby revoked forthwith.
2. Respondent shall immediately cease doing any insurance business in the State of Utah and shall not be an owner, directly or indirectly on any entity doing an insurance business in the State of Utah and shall not act as an officer, director, employee or agent of any entity doing an insurance business in this State.

NOTIFICATION

Respondent is hereby notified that failure to abide by the terms of this Order may subject it to further penalties, including additional forfeitures of up to \$5,000.00 per violation and the filing of an action to enforce this Order in the District Court, which may impose penalties of up to \$10,000.00 per day for continued violation.

You are further notified that other jurisdictions in which you may be licensed may require that you report this action to them.

DATED this 27th day of February, 2006.

D. KENT MICHIE
INSURANCE COMMISSIONER



MARK E. KLEINFELD, Esq.
Presiding Officer
Utah Department of Insurance
State Office Building, Room 3110
Salt Lake City, Utah 84114
Telephone (801) 538-3800

CERTIFICATE OF MAILING

I do hereby certify that on this date I mailed, regular, postage prepaid, a true and correct copy of the attached:

DEFAULT & DEFAULT ORDER

To the following:

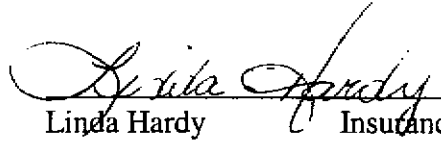
JASON LEE JONES
2019 N. Gateway Blvd.
Fresno, CA 93727

JASON LEE JONES
P.O. Box 3420
West Wendover, NV 89883-3420

JASON LEE JONES
1504 Kingston Dr.
Ogden, Utah 84403

JASON LEE JONES
2700 Peterson Place, # 290
Costa Mesa, CA 92676

DATED this 27th day of February, 2006


Linda Hardy Insurance Technician
Utah Department of Insurance
State Office Building, Room 3110
Salt Lake City, UT 84114-6901
(801) 538-3813